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JAMES J. MURI THOMPSON ANI 1700 PACIFIC AV SUITE 3300	O I P E 2 2005	papers. Each have its own I hereby cer States Posta addressed to	Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompany papers. Each additional paper, such as an assignment or formal drawing, m have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Un States Postal Service with sufficient postage for first class mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsim transmitted to the USPTO (703) 746-4000, on the date indicated below.					
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APPLICATION NO.	FILING DATE		FIRST NAMED I	NVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/671,960	09/27/2000	Rajugopal R. Gubbi		l. Gubbi		003498.P054	8320	
FITLE OF INVENTION: A	RCHITECTURE FOR A WI	IRELESS LOCAL		ORK NODE PUBLICATION	FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400)	\$0		\$1400	09/14/2005	
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PATEL, AJIT		ART UNIT		370-338000				
Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/1. "Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Olrrus Logic, Inc. Austin, Texas Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Acorporation or other private group entity Government								
la. The following fee(s) are			. Payment of Fe		uai 😕 Co	orporation or other private gr	oup entity Governm	
Issue Fee Publication Fee (No small entity discount permitted)			A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 20-08-21 (enclose an extra copy of this form).					
. Change in Entity Status	(from status indicated above		•			<u> </u>	.,	
a. Applicant claims S	☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
The Director of the USPTO NOTE: The Issue Fee and P	is requested to apply the Issu ublication Fee (if required) w	e Fee and Publicat	tion Fee (if any) I from anyone o	or to re-apply any ther than the applic	previously cant; a regi	y paid issue fee to the applications yet a paid issue fee to the application of the paid is a paid in the paid in the paid is a paid in the paid in the paid is a paid in the paid	ation identified above. he assignee or other part	

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PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number **TRANSMITTAL** Filing Date First Named Inventor **FORM** Art Unit **Examiner Name** (to be used for all correspondence after initial filing) Attorney Docket Number Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers of Appeals and Interferences Appeal Communication to TC Petition (Appeal Notice, Brief, Reply Brief) Amendment/Reply Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Identify Terminal Disclaimer below): Extension of Time Request Parto-Fee Transmittal Request for Refund Express Abandonment Request check in the amount of \$ 1400.00 CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name & KNIGHT LLP

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature Typed or printed name Date Saptember 2005

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PTO/SB/17 (12-04v2) Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE rk Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. ursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 09/671,960 Application Number FEE TRANSMITTAL Filing Date September 27, 2000 For FY 2005 Rajugopal R. Gubbi First Named Inventor **Examiner Name** Ajit Patel Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2664 TOTAL AMOUNT OF PAYMENT 1400.00 Attorney Docket No. 1356-SW METHOD OF PAYMENT (check all that apply) Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES FILING FEES** SEARCH FEES **Small Entity** Small Entity **Small Entity** Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 200 Utility 300 150 500 250 100 Design 200 100 100 50 130 65 200 100 300 160 80 Plant 150 600 300 Reissue 300 150 500 250 200 0 O 0 Provisional 100 0 **Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee Description Fee (\$) 50 25 Each claim over 20 (including Reissues) 200 100 Each independent claim over 3 (including Reissues) 180 360 Multiple dependent claims Multiple Dependent Claims **Total Claims** Extra Claims Fee (\$) Fee (\$) Fee Paid (\$) - 20 or HP = HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) Total Sheets Extra Sheets ___ (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Issue Fee \$1400.00

SUBMITTED BY			
Signature	Jones & Murdly	Registration No. 34,503 (Attorney/Agent)	Telephone (214) 969-1749
Name (Print/Type)			Date 9-9-05

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